

SERFF Tracking Number:	STAN-126730896	State:	Arkansas
Filing Company:	Standard Insurance Company	State Tracking Number:	46284
Company Tracking Number:	GP190-LIFE/S399/CHILDEF2		
TOI:	L04G Group Life - Term	Sub-TOI:	L04G.500 Other
Product Name:	Group Life Amendment		
Project Name/Number:	Group Amendment/		

Filing at a Glance

Company: Standard Insurance Company

Product Name: Group Life Amendment

TOI: L04G Group Life - Term

Sub-TOI: L04G.500 Other

Filing Type: Form

SERFF Tr Num: STAN-126730896 State: Arkansas

SERFF Status: Closed-Approved-Closed
State Tr Num: 46284

Co Tr Num: GP190-LIFE/S399/CHILDEF2

State Status: Approved-Closed

Author: Barbara Lynch

Date Submitted: 07/21/2010

Reviewer(s): Linda Bird

Disposition Date: 07/23/2010

Disposition Status: Approved-Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: Group Amendment

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Employer, Association, Trust, Other

Explanation for Other Group Market Type: Union

State Status Changed: 07/23/2010

Created By: Barbara Lynch

Corresponding Filing Tracking Number: GP190-LIFE/S399/CHILDEF2

Deemer Date:

Submitted By: Barbara Lynch

Filing Description:

Re:

Standard Insurance Company

Group Term Life Insurance

Group Life Insurance Policy Amendment form GP190-LIFE/S399/CHILDEF2

Group Life Insurance Certificate Attachment form GC190-LIFE/S399/CHILDEF2

<i>SERFF Tracking Number:</i>	<i>STAN-126730896</i>	<i>State:</i>	<i>Arkansas</i>
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NAIC: 1348-69019

Standard Insurance Company is filing for your review and approval changes to our Group Life Insurance product. Standard's Group Life Insurance product is filed under Group Policy Form GP190-LIFE and Group Certificate Form GC190-LIFE, both of which were approved for use in your state effective 2/27/1990. In October of 1998 Standard Insurance Company submitted an amendment to these forms to account for the demutualization of our company. This amendment reflected that the company was a stock company, and also served to change the form number under which the policy and certificate would be issued in the future. Effective 10/14/1998 Standard later received approval from your Department to issue our revised forms after our official demutualization, which occurred on April 21, 1999. Since that date GP190-LIFE and its certificate GC190-LIFE have been issued under the new form numbers GP190-LIFE/S399 and GC190-LIFE/S399.

Enclosed are Group Life Insurance Policy Amendment form GP190-LIFE/S399/CHILDEF2, and the corresponding Group Life Insurance Certificate Attachment form GC190-LIFE/S399/CHILDEF2. These forms amend the Child Definition to make the term "unmarried" optional language. This change is to allow the Child Definition to align with the Federal Healthcare Reform Act and extend Dependent Life benefits to dependent Child(ren) of the member regardless of marital status when requested by the Policyholder.

The specific benefit design of each group policy is negotiated and agreed upon by Standard Insurance Company and the Policyholder at the time of policy issue, and the appropriate filed language is then automatically included in the body of the policy and certificate. While the attached forms are submitted on 8 ½ by 11 pages, we may also print the same text in a booklet format (5 ½ by 8 ½ pages) or on electronic media (e.g. CD-ROM, Internet) if requested by a Policyholder. Also, if so requested, we may issue certificates in a foreign language, based upon a direct translation of the filed wording.

There is no rate impact for these changes. There is no deviation from generally accepted insurance practices.

The attached forms meet and exceed the requirements of the Arkansas Life and Disability Insurance Policy Language Simplification Act, when included within the base policy and certificate.

This group insurance product is, and will continue to be, marketed through normal insurance channels (insurance brokers and representatives) to groups traditionally eligible for group insurance. The majority of group policies will be issued to employers to cover their employees.

Company and Contact

Filing Contact Information

Barbara Lynch, Senior Compliance Analyst blynch2@standard.com

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900 SW Fifth Avenue	971-321-6705 [Phone]
C14	971-321-6407 [FAX]
Portland, OR 97204	

Filing Company Information

Standard Insurance Company	CoCode: 69019	State of Domicile: Oregon
1100 SW 6th Avenue	Group Code: 1348	Company Type: Life Insurance
Portland, OR 97204	Group Name: SIC	State ID Number:
(971) 321-6823 ext. [Phone]	FEIN Number: 93-0242990	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$100.00
Retaliatory?	No
Fee Explanation:	Two forms at \$50.00 per form.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Standard Insurance Company	\$100.00	07/21/2010	38200127

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	07/23/2010	07/23/2010

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Disposition

Disposition Date: 07/23/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Form	Group Term Life Policy Amendment		Yes
Form	Group Term Life Certificate Attachment		Yes

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Form Schedule

Lead Form Number: GP190-LIFE/S399/CHILDEF2

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	GP190-LIFE/S399/CHILDEF2	Policy/Cont	Group Term Life ract/Fratern Policy Amendment al	Initial		42.000	Policy Amend - CHILDEF2.pdf
		Certificate:	Amendmen				
		t, Insert	Page,				
		Endorseme	nt or Rider				
	GC190-LIFE/S399/CHILDEF2	Certificate	Group Term Life Amendmen Certificate t, Insert Attachment	Initial		42.000	Cert Attach - CHILDEF2.pdf
		Page,	Endorseme				
		nt or Rider					

**AMENDMENT TO
LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY FORM**

Attached to and made a part of Group Policy Form GP190-LIFE/ S399

Group Policy Form GP190-LIFE/ S399 is amended to update policy language and add optional/ variable language (shown in shading) for those policyholders who negotiate such inclusion into their Group Life and Accidental Death and Dismemberment Insurance policy issued by us. Brackets ([]) indicate the language is optional. Braces (< >) indicate the language is variable.

1. *The definition of Child* within the **DEFINITIONS** section of the policy is amended to make the term "unmarried" optional language as negotiated by the Policyholder. The purpose of this change is to allow the Child Definition to align with the Federal Healthcare Reform Act and extend Dependent Life benefits to dependent Child(ren) of the member regardless of marital status.

Child means:

1. Your [unmarried] child from live birth through [the last day of the [calendar] <month, quarter, year> next following the date on which your child reaches] age <#> [and], [(the last day of the [calendar] <month, quarter, year> next following the date on which your child reaches] age <#> if a registered student in full time attendance at an accredited educational institution)]], or on a Medically Necessary Leave Of Absence.

Medically Necessary Leave Of Absence means:

- a) a medically necessary leave of absence from an accredited educational institution otherwise causing the student's insurance under the Group Policy to end;
- b) which commences while the [unmarried] child is suffering from a serious illness or injury; and
- c) lasting not more than <one year or through age <#>, whichever is earlier.>]; or

[For purposes of insurance under the Group Policy, live birth includes your newborn infant from the moment of birth. [<Written>] Notification of the birth and remittance of premium to us must be made within <31> days of birth in order for insurance under the Group Policy to extend beyond <31> days.]]

- [2. Your [unmarried] child who meets either of the following requirements:
 - a. The child is insured under the Group Policy and, on and after the date on which insurance would otherwise end because of the Child's age, is continuously Disabled.
 - b. The child was insured under the Prior Plan on the day before the effective date of your Employer's coverage under the Group Policy and was Disabled on that day, and is continuously Disabled thereafter.]

Standard Insurance Company

by


President


Corporate Secretary

**ATTACHMENT TO
LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE CERTIFICATE FORM**

Attached to and made a part of Group Certificate Form GC190-LIFE/ S399

Group Certificate Form GC190-LIFE/ S399 is changed to update language and add optional/ variable language (shown in shading) for those policyholders who negotiate such inclusion into their Group Life and Accidental Death and Dismemberment Insurance policy issued by us. Brackets ([]) indicate the language is optional. Braces (< >) indicate the language is variable.

1. *The definition of Child* within the **DEFINITIONS** section of the certificate is amended to make the term "unmarried" optional language as negotiated by the Policyholder. The purpose of this change is to allow the Child Definition to align with the Federal Healthcare Reform Act and extend Dependent Life benefits to dependent Child(ren) of the member regardless of marital status.

Child means:

1. Your [unmarried] child from live birth through [the last day of the [calendar] <month, quarter, year> next following the date on which your child reaches] age <#> [and], [(the last day of the [calendar] <month, quarter, year> next following the date on which your child reaches] age <#> if a registered student in full time attendance at an accredited educational institution)]], or on a Medically Necessary Leave Of Absence.

Medically Necessary Leave Of Absence means:

- a) a medically necessary leave of absence from an accredited educational institution otherwise causing the student's insurance under the Group Policy to end;
- b) which commences while the [unmarried] child is suffering from a serious illness or injury; and
- c) lasting not more than <one year or through age <#>, whichever is earlier.>]; or

[For purposes of insurance under the Group Policy, live birth includes your newborn infant from the moment of birth. [<Written>] Notification of the birth and remittance of premium to us must be made within <31> days of birth in order for insurance under the Group Policy to extend beyond <31> days.]]

- [2. Your [unmarried] child who meets either of the following requirements:
 - a. The child is insured under the Group Policy and, on and after the date on which insurance would otherwise end because of the Child's age, is continuously Disabled.
 - b. The child was insured under the Prior Plan on the day before the effective date of your Employer's coverage under the Group Policy and was Disabled on that day, and is continuously Disabled thereafter.]

Standard Insurance Company

By


President

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Supporting Document Schedules

	Item Status:	Status
		Date:
Satisfied - Item:	Flesch Certification	
Comments:		
Attachment:		
AR_Read Cert.pdf		

CERTIFICATION OF READABILITY

State of Arkansas

Form	Flesch
Number	Readability
	Score
GP190-LIFE/S399/CHILDEF2	42.0
GC190-LIFE/S399/CHILDEF2	42.0

I certify that to the best of my knowledge and belief, the above-referenced form(s) meet or exceed the readability, legibility, and format requirements of any applicable laws and regulations in the state of Arkansas.

Standard Insurance Company


Signature

Larry S. Frank
Name

Assistant Vice President & Associate Counsel, ISG-Legal
Title

07/21/16
Date